

3762
JRW

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/699,003
Filing Date	October 26, 2000
First Named Inventor	M. Rigdon Lentz
Art Unit	3762
Examiner Name	Patricia Bianco
Attorney Docket Number	LEN 101 CIP CON

Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	one (1) page of PTO-1449; eleven (11) references; return postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Pabst Patent Group LLP		
Signature			
Printed name	Tiffany B. Salmon		
Date	February 11, 2005	Reg. No.	55,589

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Ronna Berman	Date	February 11, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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OIP E JC19
FEB 14 2005
PATENT & TRADEMARK OFFICE

PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180.00

Complete if Known

Application Number	09/699,003
Filing Date	October 26, 2000
First Named Inventor	M. Rigdon Lentz
Examiner Name	Patricia Bianco
Art Unit	3762
Attorney Docket No.	LEN 101 CIP CON

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 50-3129 Deposit Account Name: Pabst Patent Group LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
15 - 20 or HP =	0	x 0.00	= 0.00	Fee (\$)

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
2 - 3 or HP =	0	x 0.00	= 0.00

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)


Non-English Specification, \$130 fee (no small entity discount)

Other: Information Disclosure Statement

Fees Paid (\$)

\$180.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	55,589	Telephone	(404) 879-2153
Name (Print/Type)	Tiffany B. Salmon	Date	February 11, 2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

LEN 101 CIP CON / 077829-00009



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: M. Rigdon Lentz

Serial No.: 09/699,003

Art Unit: 3762

Filed: October 26, 2000

Examiner: Patricia Bianco

For: *METHOD AND COMPOSITIONS FOR TREATMENT OF CANCERS*

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Sir:

Pursuant to the duty of disclosure under 37 C.F.R. §1.56 and 37 C.F.R. §1.97, Applicant submits a Supplemental Information Disclosure Statement, including one (1) page of Form PTO-1449, and copies of the eleven (11) documents cited therein.

The Commissioner is hereby authorized to charge \$180.00 representing the fee required under 37 C.F.R. §1.17(p) for an Information Disclosure Statement filed after a first Office Action on the merits under 37 C.F.R. §1.97(c). It is believed that no fee is required with this submission. However, should a fee be required, the Commissioner is hereby authorized to charge any fees to Deposit Account No. 50-3129.

02/16/2005 HDEMESS1 00000004 503129 09699003

01 FC:1806 180.00 DA

U.S. Patents

<u>Number</u>	<u>Issue Date</u>	<u>Patentee</u>	<u>Class/Subclass</u>
4,512,763	04-23-1985	Schneider	604/5
4,614,513	09-30-1986	Bensinger	604/6
5,565,332	10-15-1996	Hoogenboom, et al.	435/69.1
5,817,522	10-06-1998	Goodman, et al.	436/165
5,817,528	10-06-1998	Bohm, et al.	436/529
5,919,898	07-06-1999	Nakatani, et al.	530/345
5,932,704	08-03-1999	Jubinsky	530/388.22

Foreign Documents

<u>Number</u>	<u>Publication Date</u>	<u>Patentee</u>	<u>Country</u>
0 184 040	11-06-1986	Anisa Medical Inc.	EP
2045064	02-15-1990	Ube Industries	JP
WO 96/16666	06-06-1996	Sanitaria Scaligera S.P.A.	PCT

Publications

GERAIN, et al., "Systemic release of soluble TNF receptors after high-dose TNF in isolated limb perfusion" *Cytokine* 9(12):1034-1042 (1997).

Remarks

This statement should not be interpreted as a representation that an exhaustive search has been conducted or that no better art exists. Moreover, Applicant invites the Examiner to make an independent evaluation of the cited art to determine its relevance to the subject matter of the present application. Applicant is of the opinion that his claims patentably distinguish over the art referred to herein, either alone or in combination.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'T. Salmon', is written over a horizontal line.

Tiffany B. Salmon
Reg. No. 55,589

Dated: February 11, 2005

PABST PATENT GROUP LLP
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Substitute for form 1449A/PTO

(use as many sheets as necessary)

Application Number	09/699,003
Filing Date	October 26, 2000
First Named Inventor	M. Rigdon Lentz
Group Art Unit	3762
Examiner Name	Patricia Bianco
Attorney Docket Number	LEN 101 CIP CON

Sheet	1	of	2	Attorney Docket Number	LEN 101 CIP CON
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[illegible][illegible]

Examiner's Signature		Date Considered	
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¹ Unique citation designation number ² See attached Kinds of U.S. Patent Documents. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant to place a check mark here if English language Translation is attached.

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<p>Substitute for form 1449A/PTO</p> <p>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</p> <p>(use as many sheets as necessary)</p>		Complete if Known	
		Application Number	09/699,003
		Filing Date	October 26, 2000
		First Named Inventor	M. Rigdon Lentz
		Group Art Unit	3762
		Examiner Name	Patricia Bianco
		Attorney Docket Number	LEN 101 CIP CON
Sheet	2	of	2

OTHER ART – NON PATENT LITERATURE DOCUMENTS			
Examiner's Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	T ²
		GERAIN, et al., "Systemic release of soluble TNF receptors after high-dose TNF in isolated limb perfusion" <i>Cytokine</i> 9(12):1034-1042 (1997).	

Examiner's Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to application.

¹ Unique citation designation number ² See attached Kinds of U.S. Patent Documents. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SENT TO: Assistant Commission for Patent, Washington, DC 20231.

